

# Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

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## Statement Covers Period

from 07/01/2017

through 12/31/2017

Date Stamp

CALIFORNIA  
1992 FORM **401**

1/4

FOR OFFICIAL USE ONLY

## I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION:

VOTER NEWSLETTER; A Project of the Coalition  
for California

ID NUMBER

1355767

ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

Long Beach CA 90802

NAME OF TREASURER:

Jill Barad

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

Sherman Oaks CA 91403

## II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

☐

Committee Report  
Attached

☐

ID Number if  
Recipient Committee

## III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ <u>20877.00</u> Sch. A, Line 3	\$ <u>133382.00</u>
2 TOTAL PAYMENTS MADE	\$ <u>2593.00</u> Sch. B, Line 3	\$ <u>72245.70</u>

## IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/21/2018 At \_\_\_\_\_ By David L. Gould  
DATE CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer David L. Gould Title: ATR  
TYPE OR PRINT

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE

INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT FOR SLATE MAILER ORGANIZATIONS.

# Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA 1992 FORM 401</b>
	2/4
I.D NUMBER 1355767	

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NAME OF SLATE MAILER ORGANIZATION:

VOTER NEWSLETTER: A Project of the Coalition for California

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER SUPPORT      OPPOSE		
07/14/2017 	Progressive Women Silicon Valley State PAC  Sacramento CA 95814 Reference No:		X	1000.00	1000.00
12/14/2017 	Andy Thorburn for Congress  Fullerton CA 92834 Reference No:	Andy Thorburn  Other -- US Congress	X	4880.00	4880.00
12/14/2017 	Riverside Sheriffs Association Public Education Fund  Los Angeles CA 90017 Reference No:		X	13277.00	13277.00

SUBTOTAL

\$

## Summary

- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ 20877.00
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ 0.00
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ 20877.00

# Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA 1992 FORM 401</b>
	3/4
I.D NUMBER 1355767	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

VOTER NEWSLETTER: A Project of the Coalition for California

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT      OPPOSE		
12/18/2017 	Parrish For Orange County Assessor   Santa Ana CA 92705 Reference No:	Claude Parrish  Assessor  Orange	X	1720.00	1720.00

<b>Summary</b>	<b>SUBTOTAL</b>	<b>\$ 20877.00</b>
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- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ \_\_\_\_\_
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ \_\_\_\_\_
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ \_\_\_\_\_

# Schedule B Payments Made

SCHEDULE B

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA 1992 FORM <b>401</b>
	4/4
I.D NUMBER 1355767	

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NAME OF SLATE MAILER ORGANIZATION:

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NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT	AMOUNT PAID
Crummitt & Associates  Long Beach CA 90802 Reference No:	Non-Profit Status Campaign Reporting	250.00
Ryan Sherman  Rocklin CA 95765 Reference No:	Consulting Services	2343.00

## Summary

	SUBTOTAL	\$ 2593.00
1. Payments of \$100 or More (Include all Schedule B subtotals)	\$	2593.00
2. Payments under \$100 This Period (Not itemized)	\$	0.00
3. Total Payments This Period (Line 1 + Line 2). Enter here and in Column A, Line 2, of the Summary of Payments section on Page 1.	\$	2593.00